
TITLE 405 OFFICE OF THE SECRETARY OF FAMILY AND SOCIAL SERVICES

Notice of Public Hearing
LSA Document #10-183**Notice of Public Hearing**

Under [IC 4-22-2-24](#), notice is hereby given that on September 21, 2010, at 1:30 p.m. EDT, at the Indiana Government Center South, 402 West Washington Street, Room W451, Conference Room A, Indianapolis, Indiana, the Office of the Secretary of Family and Social Services will hold a public hearing on a proposed rule to amend [405 IAC 1-14.6-2](#), [405 IAC 1-14.6-4](#), [405 IAC 1-14.6-7](#), [405 IAC 1-15-2](#), [405 IAC 1-15-3](#), [405 IAC 1-15-5](#), and [405 IAC 1-15-6](#) and to repeal [405 IAC 1-15-7](#) to comport with federal requirements (42 CFR Part 483) implementing version 3.0 of the Minimum Data Set (MDS), effective October 1, 2010, and make other related changes.

In accordance with public notice requirements established at [IC 4-22-2-24\(d\)](#), the Indiana Family and Social Services Administration, Office of Medicaid Policy and Planning publishes this notice of proposed changes implementing version 3.0 of the Minimum Data Set (MDS). This rule amendment is required to comport with federal requirements (42 CFR Part 483) implementing version 3.0 of the Minimum Data Set, effective October 1, 2010. Version 3.0 of the MDS no longer captures special care unit (SCU) information that is used in the case mix reimbursement system, making this rule amendment necessary to capture SCU information through the annual cost reporting processes. While completion of resident room numbers on version 3.0 on the MDS is not mandated by federal MDS requirements, this rule amendment requires that such room numbers be completed and submitted since this information is essential to correctly determine Medicaid case mix reimbursement for special care units. The MDS transmission, therapy, and nursing restorative requirements are being removed since these requirements are included in federal regulations. This rule amendment also increases the percentage that the administrative reimbursement component is reduced due to unsupported resident assessment to provide a stronger incentive for facilities to meet minimum MDS requirements. Additionally, the maximum frequency between MDS audits is being increased from no less often than once every 15 months under the current rule, to no less often than every 36 months under this rule amendment to recognize a reduced overall risk of unsupported assessments. Lastly, the frequency and time period that preliminary CMI reports are issued is being modified to better correspond with the MDS reporting cycle.

All parties interested in the rule are invited to attend the hearing and offer public comments. In lieu of attendance at the hearing, written comments may be directed to IFSSA, Attention: Kevin Wild, 402 West Washington, Room W451, Indianapolis, Indiana 46204. Correspondence should be identified in the following manner: "COMMENT RE: LSA DOCUMENT #10-183 PROPOSED IMPLEMENTATION OF MDS VERSION 3.0". Written comments timely received will be made available for public display at the Office of Medicaid Policy and Planning, 402 West Washington Street, Room W382, Indianapolis, IN 46204.

If an accommodation is required to allow an individual with a disability to participate in this public meeting, please contact Kevin Wild (317) 233-2582 at least 48 hours prior to the meeting.

Copies of these rules are now on file at the Indiana Government Center South, 402 West Washington Street, Room W451 and Legislative Services Agency, Indiana Government Center North, 100 North Senate Avenue, Room N201, Indianapolis, Indiana and are open for public inspection.

Elizabeth M. Karlson
Deputy General Counsel

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